PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/522,608			ing Date 02/2005	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY	
FOR			NUMBER FIL	.ED	NUMBER EXTRA		RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A		N/A]	N/A		
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/A]	N/A]	N/A		
EXAMINATION FEE (37 CFR 1.16(a), (p), or (q))			N/A		N/A]	N/A			N/A		
	TAL CLAIMS CFR 1.16(i))		mir	us 20 = *		1	x \$ =		OR	x s =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			m	inus 3 = *		1	x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE is	heets of pape \$250 (\$125 dditional 50 s	wings exceed 100 ation size fee due ity) for each ction thereof, See 37 CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))]]			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL		
									ER THAN ALL ENTITY			
AMENDMENT	12/22/2010	CLAIMS REMAINING AFTER AMENDMEI		HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT LY EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.18())	• 15	Minus	 20	= 0]	x \$ =		OR	X \$52=	0	
	Independent (37 CFR 1,16(h))	٠1	Minus	 3	= 0]	x \$ =		OR	X \$220=	0	
ΜĒ	Application Size Fee (37 CFR 1.16(s))											
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					1			OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAININ AFTER AMENDMEI		HIGHEST NUMBER PREVIOUSI PAID FOR	PRESENT LY EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16(i))		Minus	**	=]	x \$ =		OR	x \$ =		
Δ	Independent (37 CFR 1,16(h))		Minus	***	-]	x \$ =		OR	x s =		
Ш	Application Size Fee (37 CFR 1.16(s))]]			
ΑN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** 16	"If the entry in column 1 is less than the entry in column 2, write "o" in column 3. Legal Instrument Examiner. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.											

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